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Governor

Howie C. Morales
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**NEW MEXICO
ENVIRONMENT DEPARTMENT**

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James C. Kenney
Cabinet Secretary

Jennifer J. Pruett
Deputy Secretary

Certified Mail-Return Receipt Requested

June 17, 2019

Mr. Robert Towle, Operations Foreman
New Mexico Water Service Company
401 Horner Street
Belen, New Mexico 87002

RE: New Mexico Water Service Company; Rio Del Oro Wastewater Treatment Facility; Minor Facility; NPDES Permit No. NM0030414; NPDES Compliance Evaluation Inspection; June 4, 2019

Dear Mr. Towle:

Enclosed please find a copy of the report and check list for the referenced inspection that the New Mexico Environment Department (NMED) conducted at your facility on behalf of the U. S. Environmental Protection Agency (USEPA). This inspection report will be sent to the USEPA in Dallas for their review. These inspections are used by USEPA to determine compliance with the National Pollutant Discharge Elimination System (NPDES) permitting program in accordance with the requirements of the federal Clean Water Act.

Further explanations are provided with the check list and discuss issues that should be addressed. The introduction and treatment scheme are also included with this inspection report.

You are encouraged to review the inspection report, required to correct any issues noted during the inspection, and advised to modify your operation and/or administrative procedures as appropriate. If you have comments on or concerns with the basis for the findings in the NMED inspection report, please contact us (see address below) in writing within 30 days from the date of this letter. Further, you are encouraged to notify in writing USEPA and NMED regarding modifications and compliance schedules at the address below:

David Long, NPDES Enforcement Coordinator
Environmental Protection Agency, Region 6
NPDES Enforcement Branch (6EN-WM)
1445 Ross Avenue, Suite 1200
Dallas, Texas 75202-2733

Sarah Holcomb, Program Manager
New Mexico Environment Dept.
Surface Water Quality Bureau
Point Source Regulation Section
PO Box 5469
Santa Fe, New Mexico 87502

NM Water Service Company/Rio Del Oro

June 17, 2019

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David Long (Long.David@epa.gov) is USEPA Region 6's NPDES Enforcement Coordinator at the above address. If you have any questions about this inspection report, please contact Sandra Gabaldon at 505-827-1041 or Sandra.gabaldon@state.nm.us

Sincerely,

/s/ Sarah Holcomb

Sarah Holcomb, Program Manager
Point Source Regulation Section
Surface Water Quality Bureau

Cc: Carol Peters-Wagnon, USEPA (6EN-WM) via email
David Long, USEPA (6EN-WM) via email
Nancy Williams, USEPA (6EN-WC) via email
Amy Andrews, USEPA (6EN-WM) via email
David Esparza, USEPA (6EN-WM) via email
Brent Larson, USEPA (6WQ-PP) via email
John Rhoderick, Manager, District I via email



Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

NPDES Compliance Inspection Report

Section A: National Data System Coding

| | | | | | |
|--|---|-----------------------------------|-----------------------------------|-----------------------------------|----------------------------------|
| Transaction Code | NPDES | yr/mo/day | Inspec. Type | Inspector | Fac Type |
| 1 <input type="text" value="N"/> 2 <input type="text" value="5"/> 3 <input type="text" value="N"/> <input type="text" value="M"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="4"/> <input type="text" value="1"/> <input type="text" value="4"/> | <input type="text" value="1"/> <input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="0"/> <input type="text" value="4"/> | 18 <input type="text" value="C"/> | 19 <input type="text" value="S"/> | 20 <input type="text" value="1"/> | |
| <input type="text" value="M"/> <input type="text" value="I"/> <input type="text" value="N"/> <input type="text" value="O"/> <input type="text" value="R"/> <input type="text" value="W"/> <input type="text" value="W"/> <input type="text" value="T"/> <input type="text" value="P"/> | | | | | |
| Inspection Work Days | Facility Evaluation Rating | BI | QA | Reserved | |
| 67 <input type="text" value="1"/> 69 | 70 <input type="text" value="4"/> | 71 <input type="text" value="N"/> | 72 <input type="text" value="N"/> | 73 <input type="text" value=""/> | 74 <input type="text" value=""/> |
| | | | | 75 <input type="text" value=""/> | 80 <input type="text" value=""/> |

Section B: Facility Data

| | | |
|--|--|--|
| Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) Take I-25 South, Exit 215, south on NM 47; Turn left on Patricio. Continue to Tome Cemetery and turn left on dirt road. Follow road to cemetery. | Entry Time /Date 0943 Hours / June 4, 2019 | Permit Effective Date February 1, 2016 |
| | Exit Time/Date 1130 Hours / June 4, 2019 | Permit Expiration Date January 31, 2021 |
| Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Porfirio Baca, Level II Certified Operator | Other Facility Data SIC 4952 LAT: 34 28.28.34 LONG: -106 42 21.45 | |
| Name, Address of Responsible Official/Title/Phone and Fax Number Mr. Paul Risso, General Manager Mr. Bobby Towle, Operations Foreman 401 Horner Street Belen, New Mexico 87002 | Contacted Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |

Section C: Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

| | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> Permit | <input checked="" type="checkbox"/> Flow Measurement | <input checked="" type="checkbox"/> Operations & Maintenance | <input checked="" type="checkbox"/> CSO/SSO |
| <input checked="" type="checkbox"/> Records/Reports | <input checked="" type="checkbox"/> Self-Monitoring Program | <input checked="" type="checkbox"/> Sludge Handling/Disposal | <input checked="" type="checkbox"/> Pollution Prevention |
| <input checked="" type="checkbox"/> Facility Site Review | <input checked="" type="checkbox"/> Compliance Schedules | <input checked="" type="checkbox"/> Pretreatment | <input checked="" type="checkbox"/> Multimedia |
| <input checked="" type="checkbox"/> Effluent/Receiving Waters | <input checked="" type="checkbox"/> Laboratory | <input checked="" type="checkbox"/> Storm Water | <input checked="" type="checkbox"/> Other: |

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

Please see checklist and further explanations for details of findings

| | | |
|--|--|-----------------------|
| Name(s) and Signature(s) of Inspector(s) Sandra Gabaldon /s/ Sandra Gabaldon | Agency/Office/Telephone/Fax NMED/SWQB/(505) 827-1041/(505) 827-0160 | Date June 17, 2019 |
| Signature of Management QA Reviewer /s/ Sarah Holcomb Sarah Holcomb, Program Manager | Agency/Office/Phone and Fax Numbers NMED/SWQB/(505) 827-2897/(505) 827-0160 | Date June 17, 2019 |

| | | | |
|--|--|---|--|
| New Mexico Water Service Company – Rio Del Oro | | PERMIT NO. NM0030414 | |
| SECTION A – PERMIT VERIFICATION | | | |
| PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u>) | |
| DETAILS: | | | |
| 1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA | |
| 3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 4. ALL DISCHARGES ARE PERMITTED | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| SECTION B – RECORDKEEPING AND REPORTING EVALUATION | | | |
| RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u>) | |
| DETAILS: | | | |
| 1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| b) NAME OF INDIVIDUAL PERFORMING SAMPLING | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| c) ANALYTICAL METHODS AND TECHNIQUES. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| d) RESULTS OF ANALYSES AND CALIBRATIONS. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| e) DATES AND TIMES OF ANALYSES. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| f) NAME OF PERSON(S) PERFORMING ANALYSES. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| SECTION C – OPERATIONS AND MAINTENANCE | | | |
| TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u>) | |
| DETAILS: | | | |
| 1. TREATMENT UNITS PROPERLY OPERATED. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 2. TREATMENT UNITS PROPERLY MAINTAINED. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED . | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 5. ALL NEEDED TREATMENT UNITS IN SERVICE | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED. | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 8. OPERATION AND MAINTENANCE MANUAL AVAILABLE. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |

| | | | |
|--|--|--|--|
| New Mexico Water Service Company – Rio Del Oro | | PERMIT NO. NM0030414 | |
| SECTION C – OPERATIONS AND MAINTENANCE (CONT'D) | | | |
| 9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? | | <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA | |
| IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA | |
| HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS? | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA | |
| 10.HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? | | <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA | |
| IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT? | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA | |
| SECTION D – SELF-MONITORING | | | |
| PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS. DETAILS: | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u>). | |
| 1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 6. SAMPLE COLLECTION PROCEDURES ADEQUATE | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| a) SAMPLES REFRIGERATED DURING COMPOSITING. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| b) PROPER PRESERVATION TECHNIQUES USED. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| c) CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136.3. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 7. IF MONITORING AND ANALYSES ARE PERFORMED MORE OFTEN THAN REQUIRED BY PERMIT, ARE THE RESULTS REPORTED IN PERMITTEE’S SELF-MONITORING REPORT? | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA | |
| SECTION E – FLOW MEASUREMENT | | | |
| PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS. DETAILS: | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u> .) | |
| 1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. TYPE OF DEVICE: Closed pipe | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 4. CALIBRATION FREQUENCY ADEQUATE. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| RECORDS MAINTAINED OF CALIBRATION PROCEDURES. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 6. HEAD MEASURED AT PROPER LOCATION. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 7. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES. | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| SECTION F – LABORATORY | | | |
| PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS. DETAILS: | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u> .) | |
| 1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES) | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |

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|--|-----------|------------------|-----------|--|------------|---|-------|
| New Mexico Water Service Company – Rio Del Oro | | | | | | PERMIT NO. NM0030414 | |
| SECTION F - LABORATORY (CONT'D) | | | | | | | |
| 2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA | |
| 3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT. | | | | | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 4. QUALITY CONTROL PROCEDURES ADEQUATE. | | | | | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 5. DUPLICATE SAMPLES ARE ANALYZED. <u>10</u> % OF THE TIME. | | | | | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 6. SPIKED SAMPLES ARE ANALYZED. <u> </u> % OF THE TIME. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA | |
| 7. COMMERCIAL LABORATORY USED. | | | | | | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| LAB NAME <u>Hall Environmental Analysis Laboratory, Inc</u> <u>Cove Environmental</u> | | | | | | | |
| LAB ADDRESS <u>4901 Hawkins, NE; Albuquerque, NM 87109</u> <u>3400 W. Lakeview Road; Stillwater, OK 74075</u> | | | | | | | |
| PARAMETERS PERFORMED <u>BOD; TSS; E. coli</u> <u>Biomonitoring</u> | | | | | | | |
| SECTION G - EFFLUENT/RECEIVING WATERS OBSERVATIONS. <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u>). | | | | | | | |
| OUTFALL NO. | OIL SHEEN | GREASE | TURBIDITY | VISIBLE FOAM | FLOAT SOL. | COLOR | OTHER |
| 001 | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| RECEIVING WATER OBSERVATIONS: Facility currently going to re-use; no discharge to surface water. | | | | | | | |
| SECTION H - SLUDGE DISPOSAL | | | | | | | |
| SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS. DETAILS: | | | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u>). | | | |
| 1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY. | | | | | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503. | | | | | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA | |
| 3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: <u>Surface disposal Site</u> (e.g., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE) | | | | | | | |
| SECTION I - SAMPLING INSPECTION PROCEDURES (FURTHER EXPLANATION ATTACHED <u> </u>). | | | | | | | |
| 1. SAMPLES OBTAINED THIS INSPECTION. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA | |
| 2. TYPE OF SAMPLE OBTAINED | | | | | | | |
| GRAB | | COMPOSITE SAMPLE | | METHOD | | FREQUENCY | |
| 3. SAMPLES PRESERVED. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 4. FLOW PROPORTIONED SAMPLES OBTAINED. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 6. SAMPLE REPRESENTATIVE OF VOLUME AND MATURE OF DISCHARGE. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 7. SAMPLE SPLIT WITH PERMITTEE. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |
| 9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT. | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA | |

RIO DEL ORO WWTP
COMPLIANCE EVALUATION INSPECTION
NPDES Permit No. NM0030414
June 4, 2019

INTRODUCTION

A compliance evaluation inspection (CEI) was conducted at the Rio del Oro WWTP on June 4, 2019 by Sandra Gabaldón and Daniel Valenta of the State of New Mexico Environment Department (NMED), Surface Water Quality Bureau (SWQB). This facility is a private domestic WWTP classified under the federal Clean Water Act (CWA), Section 402 National Pollutant Discharge Elimination System (NPDES) permit program and is assigned NPDES permit number NM0030414. The facility design flow is 0.3 million gallons a day (MGD).

The Rio del Oro WWTP discharges into La Canada de La Loma de Arena thence to La Constancia Ditch, thence to the Rio Grande in segment 20.6.4.105 (*NMAC State of New Mexico Standards for Interstate and Intrastate Surface Waters*). Designated uses of Segment 20.6.4.105 are irrigation, marginal warmwater aquatic life, livestock watering, public water supply, wildlife habitat and primary contact.

The NMED performs a certain number of CEI's annually for the United States Environment Protection Agency (USEPA). The purpose of this inspection is to provide the USEPA with information to evaluate the permittee's compliance with their NPDES permit. The enclosed inspection report is based on verbal information supplied by the permittee's representative, observations made by the NMED inspector, and a review of records maintained by the permittee, commercial laboratory, and/or NMED. Findings of the inspection are detailed on the attached EPA form 3560-3.

The inspectors arrived at the facility at 0943 hours and conducted an entrance interview with the on-site operator, Mr. Porfirio Baca. Sandra Gabaldon, lead inspector, showed her credentials to Mr. Baca and proceeded with the inspection.

TREATMENT SCHEME:

The Rio del Oro wastewater treatment facility is a membrane bioreactor.

Raw sewage is discharged into one of two (2) automatic fine bar screens (one on-line; one standby) that are provided with a common conveyor/washer/compactor (CWC). The CWC removes organics from the screenings and automatically dumps the washed and compacted screenings into a dumpster that is emptied at a landfill.

The influent from the bar screen discharges into the pre-air basin to be mixed with the activated sludge (mixed liquor suspended solids). Not only are BOD and TSS removed in the pre-aeration basin, nitrogen is also removed with alternating periods of aeration (nitrification) and anoxic mixing (denitrification).

Two (2) submersible pumps continuously pump the mixed liquor from the pre-aeration basin into each of the two (2) separate bioreactors. Each reactor is equipped with four (4) submerged membrane units (SM*) which have 200 flat plate filters in each unit. Facility effluent is withdrawn through the flat plate

membranes (filtered) by permeate pumps (two in line; one standby), disinfected with ultraviolet light, and discharged to a holding basin for irrigation reuse.

The excess mixed liquor suspended solids in the bioreactors automatically recycles back to the pre-aeration basin through telescoping valves. Waste activated sludge is removed from both bioreactors daily and is discharged into the sludge holding tank. Sludge is removed weekly from the holding tank and taken to the surface disposal site.

Air is supplied to the pre-aeration and bioreactor basins with two (2) separate aeration systems. Two (2) aeration blowers are provided for each system (one on line; one standby). The MBR is monitored and controlled by a programmable logic controller (PLC) that also provided supervisory control and data acquisition for alarm notification. Operator control is provided through a human-machine interface that is simply a PC located in the admin/lab building. In the event of a failure of the PLC, the facility can also be operated manually.

The facility has had numerous up-grades to the plant and continue to replace equipment prior to having any issues. This facility is well run and in excellent condition for its years of service.

SLUDGE MANAGEMENT:

The facility pumps sludge from the aerobic digester into a septage truck which hold approximately 2,000 gallons. From here, the sludge is surface disposed at a dedicated site approximately 4 miles from the facility. The sludge is surface disposed and incorporated into the soil approximately four hours after application.

NMED/SWQB
Official Photograph Log
Photo # 1

| | |
|---|-------------------|
| New Mexico Water Service Company / Rio del Oro Membrane Bioreactor Treatment Facility | |
| City/County: Tome / Valencia | State: New Mexico |
| Location: Rio Del Oro | |
| Subject: New Aerzen Blowers (2) | |



NMED/SWQB
Official Photograph Log
Photo # 2

| | |
|---|-------------------|
| New Mexico Water Service Company / Rio del Oro Membrane Bioreactor Treatment Facility | |
| City/County: Tome / Valencia | State: New Mexico |
| Location: Rio Del Oro | |
| Subject: Headworks with stainless steel bar screen | |



NMED/SWQB
Official Photograph Log
Photo # 3

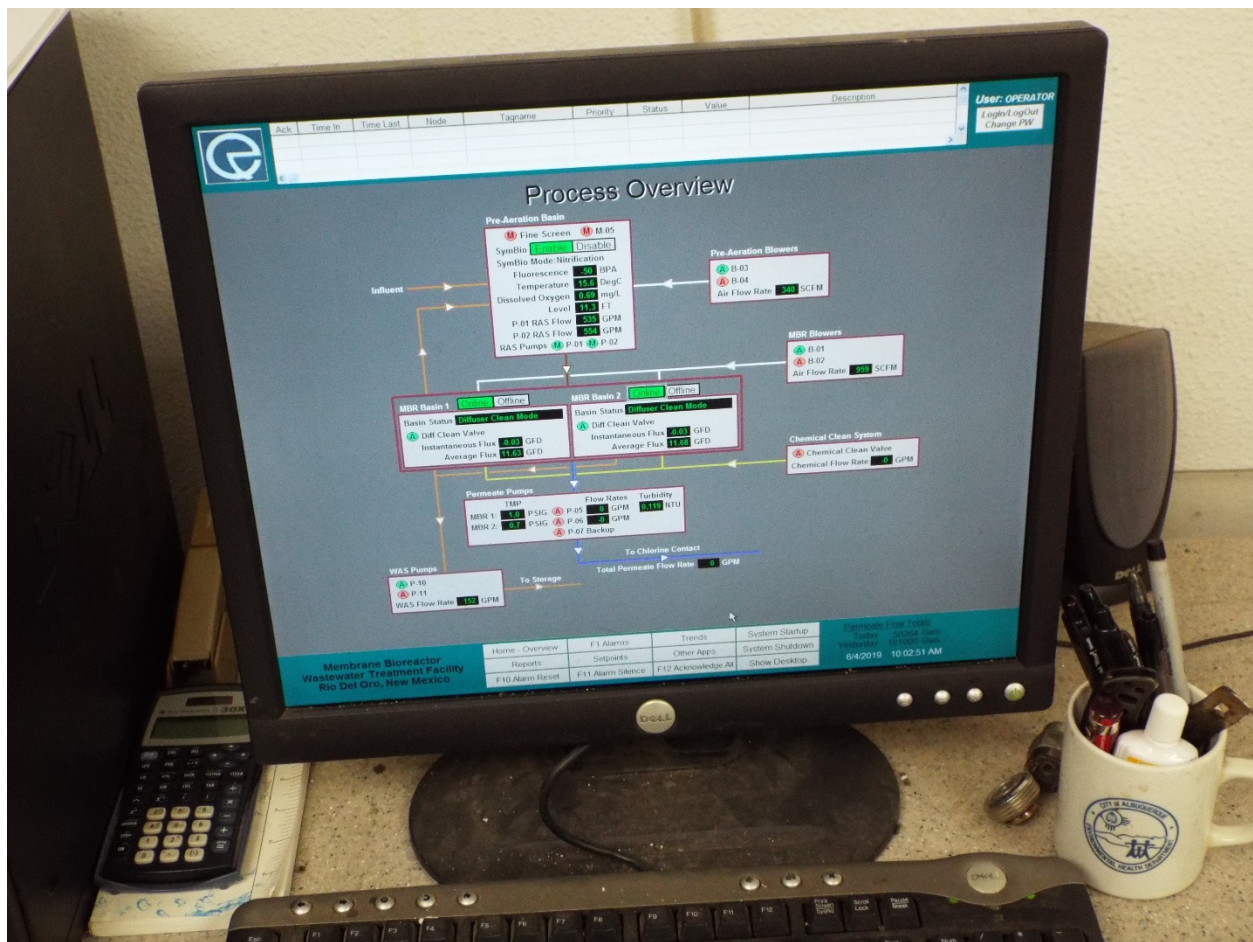
New Mexico Water Service Company / Rio del Oro Membrane Bioreactor Treatment Facility

City/County: Tome / Valencia

State: New Mexico

Location: Rio Del Oro

Subject: Computer screen with overview of plant. New Computer will be installed in the next week.



NMED/SWQB
Official Photograph Log
Photo # 4

| | |
|---|-------------------|
| New Mexico Water Service Company / Rio del Oro Membrane Bioreactor Treatment Facility | |
| City/County: Tome / Valencia | State: New Mexico |
| Location: Rio Del Oro | |
| Subject: Membrane Bioreactor basins | |



NMED/SWQB
Official Photograph Log
Photo # 5

| | |
|---|-------------------|
| New Mexico Water Service Company / Rio del Oro Membrane Bioreactor Treatment Facility | |
| City/County: Tome / Valencia | State: New Mexico |
| Location: Rio Del Oro | |
| Subject: UV System | |

